Psychotherapy and Politics International

2022, VOL. *20*, NOS. 1 & 2, 1–29
https://doi.org/10.24135/ppi.v20i1and2.08

Online ISSN: 1556-9195 Journal homepage: https://ojs.aut.ac.nz/psychotherapy-politics-international

PEER-REVIEWED ARTICLE

Therapeutic reflections on the 'pandemic'

Bert Olivier,* Honorary Professor of Philosophy, University of the Free State, South Africa

ABSTRACT

This article attempts to think through the many, often contradictory aspects of the present 'pandemic', with a view to arriving at a cogent notion of what 'psychotherapy' would mean under these circumstances. It begins with a note on the hermeneutic meaning of 'prejudice' and how this applies to the present article, and then proceeds to a consideration of the relevance of the idea of 'mass psychosis', informed by Leonard Shlain's characterisation of the 16th century witch hunts in western Europe, in the course of which more than half a million women were executed as supposed 'witches'. This suggests a parallel with today's manifestation of what is arguably a mass psychosis, induced by endemic fear of lethal contamination, fed by global governmental responses (prescribed by the World Health Organization) to the alleged 'pandemic' caused by this pathogen. Aspects of what might be called the current 'vaccine tyranny' are investigated, as well as the nature of a 'mass psychosis', which is explored from various perspectives (including Lacanian psychoanalysis), before attention shifts to the issue of appropriate psychotherapy, with recourse to the thinking of Julia Kristeva on 'revolt' and Lacan on the 'revolutionary's choice'.

KEYWORDS: group behaviour; mass psychosis; 'pandemic'; psychoanalysis; revolt; 'vaccines'; witch craze

*Contact details: OlivierG1@ufs.ac.za

> '…if you can keep your head when all about you are losing theirs and blaming it on you' (From *If*, by Rudyard Kipling, 1895).

INTRODUCTION: A NOTE ON 'PREJUDICE'

In his major work on hermeneutics (the art of interpretation), *Truth and Method* (2004), Hans-Georg Gadamer, offering a clarification of Martin Heidegger's notions of 'fore-having, fore-sight, and fore-conception', famously wrote about the unavoidability of 'pre-judgement' or 'prejudice', and of the structure of a 'hermeneutic circle' in the process of understanding and interpretation. Here—in order to come to interpretive grips with the matter or thing at hand—one faces the task of repeatedly modifying one's initial understanding as more aspects of this 'thing' come into view. The latter could be a literary, scientific, or philosophical text, or texts, or it could be a series of events unfolding around one (which, for interpretive purposes, display the structure of a 'text', metaphorically speaking). Gadamer elaborates as follows:

> A person who is trying to understand a text is always projecting. He projects a meaning for the text as a whole as soon as some initial meaning emerges in the text. Again, the initial meaning emerges only because he is reading the text with particular expectations in regard to a certain meaning. Working out this fore-projection, which is constantly revised in terms of what emerges as he penetrates into the meaning, is understanding what is there. (Gadamer, 2004, p. 269)

This description is, of course, a rough abbreviation of the whole. The process that Heidegger describes is that every revision of the fore-projection is capable of projecting before itself a new projection of meaning; rival projects can emerge side-by-side until it becomes clearer what the unity of meaning is; interpretation begins with fore-conceptions that are replaced by more suitable ones. This constant process of new projection constitutes the movement of understanding and interpretation.

Such repeated fore-projection, on the basis of 'fore-having, fore-sight, and fore-conception' occurs all the time in human beings' lives—if there is one thing we are as humans, it is constantly interpreting beings. The present circumstances, under which the world has witnessed the emergence of what has been dubbed a 'pandemic' (a contestable term, given the relatively low mortality rate associated with it; see Worldometer Coronavirus https://www.worldometers.info/coronavirus/#countries), are no exception. Hence, in Gadamerian terms, as these events unfolded one was incrementally subjected to more news and information concerning the spread of what was called a 'novel coronavirus' (SARS-Cov-2), and the illness that it gave rise to was given a name, to wit, COVID-19. Attempts to understand its origin were published in news media, with an initial (apparent) agreement that it probably came from an animal like a bat, through an intermediary animal like a pangolin, and that it was probably transferred to a human being at a so-called 'wet-market' in Wuhan, China. Guided by the fore-conception that a micro-biotic entity such as a virus originates somewhere, possibly in natural surroundings, and having read several articles on this

supposed scenario—'supposed', because no one could be certain of the accuracy of this reconstruction of the virus's provenance—it appeared to me to be (provisionally) confirmed that this pathogen was of natural origin, and that it had, through 'zoonotic' transfer, infected humans. Hence, the fore-projection in my early writings on the matter affirmed COVID-19's natural origin, as in for example, the introduction of my book *Why Nothing Seems to Matter any More* (Olivier, 2020).

As Gadamer indicates, however, the interpretive phase of understanding the world is an ongoing process, and this applies to understanding the 'pandemic' as well. My initial fore-projection of the coronavirus's origin being natural was soon challenged by emerging claims in the media, that it was in fact not natural (or wholly natural), and that evidence existed suggesting its provenance to have been a laboratory for viral research in Wuhan—according to some claims it was accidentally released from the laboratory, and according to others, this was done deliberately (for an overview of this, see Mercola, 2022a, reference available from the present author). Needless to say, all these 'projects' competed with one another for credence, and the interpretive task was to weigh them up against one another in terms of available evidence.

Similarly, regarding other aspects of the 'pandemic' such as lockdowns, social distancing, and mask wearing, the process of understanding followed the pattern of fore-conception, fore-projection, revision of the latter in light of new claims and evidence, and so on. The most contested aspect of these developments was undoubtedly the eagerly anticipated 'vaccines'—a word which I put in scare quotes because to this day it is contested, given the claims and counter-claims regarding its medical status and vaunted efficacy. When President Donald Trump announced Operation Warp-Speed for the speedy development of these 'vaccines', no one expected them to arrive on the scene within a mere few months—previously it had taken years to develop vaccines against pathogens. This was already a factor that modified my initial assumption—or fore-projection—that vaccines would indeed be the desired antidote to COVID-19. Add to this the controversy surrounding hydroxychloroquine as a putatively effective treatment of COVID-19, and later a repeat of this controversy regarding ivermectin for effective early treatment (Kennedy, 2021), and it should be clear how one's fore-projections have been intermittently subjected to reassessment in the light of new claims, accompanied by supposed evidence. Crucial evidence regarding the status of the 'vaccines'—as far as my own stance towards them is concerned—came from a host of medical doctors worldwide (Olivier, 2021), to the effect that, once the 'vaccines' had been administered to a significant number of people globally, apparently incontrovertible indications started emerging that they were not safe and that they were causing serious adverse effects, including death. Needless to say, I investigated this evidence as carefully as possible in the light of counter-claims, with the result that I arrived at the interpretive (but still in principle revisable) position put forward in this article. I should add that the appearance of Robert Kennedy's thoroughly researched book (2021) on Dr Fauci and Bill Gates confirmed

to me that my understanding of all these matters related to the 'pandemic' was indeed defensible.

The point I am making is that, for someone *who has constantly examined all the various claims regarding COVID-19 and the factors surrounding it*, at no point could it be said that the position one has arrived at is 'mere prejudice' in the colloquial sense of the term. Of course, *unless* one examines all available evidence regarding matters such as 'vaccine'-efficacy, for instance, adopting a stance, pro or contra, would indeed be prejudice or bias in the ordinary sense. To be sure, in Gadamerian terms, one never, in principle, reaches a point where one's understanding of a certain phenomenon is final, and in this sense, it remains a revisable 'prejudice' or pre-judgement to be reassessed in light of new evidence (although at present the accumulating evidence supporting my own stance has the effect of strengthening and nuancing it). However, that does not preclude one from coming to certain insights which seem, at that time of their articulation, to be supported by available evidence. This is the case regarding the topic of the present article.

AN HISTORICAL PARALLEL

In his wide-ranging study of the conflict between 'word' and 'image'—or more specifically between the social values attached to abstraction and concreteness, respectively (the functions of the left and right hemispheres of the brain, respectively)—Leonard Shlain (1998) elaborates on the astonishing ebullition of violent misogyny in the guise of relentless witch hunting and executions from the late 15th century CE until the early 17th century. His argument is that the invention of the printing press by Gutenberg in the late 15th century, and the consequent, rapid increase in literacy, explains this singular historical phenomenon: under the pressure of the sudden reinforcement of left-brain activity, which had for centuries been associated with masculine values such as objectivity, logicality, and abstraction, a vehement rejection of feminine, right-brain oriented values, and concomitantly a merciless persecution of women as the bearers of these, occurred. He writes:

> While the idea that typography played a sinister role in Western culture might seem counterintuitive, I submit one final piece of evidence: one last, breathtaking horror story—the torture, mutilation, and incineration of untold numbers of women during the European witch craze that flared from the late fifteenth through the early seventeenth centuries.
>
> Witch hunting was *woman* hunting. A chronicler in 1600 wrote, 'Demons take no account of males… and among a hundred witches, there's scarcely a man to be seen.' Over 80 percent of accused 'witches' were female; in German-speaking lands the percentage often was close to 100 percent. Historians have been at a loss to explain this bizarre episode. (Shlain, 1998, pp. 363–364)

In this excerpt Shlain uses the phrase 'witch craze', and it is meant literally. From his account, it is clear that the almost incomprehensible extermination of women during this era was the expression of something that cannot be associated with reason, at least in its everyday, benign form of 'common sense'. Here he drives the point home:

> 'Hysteria' is an unmanageable fear expressed by emotional excess. It is a type of behavior many men associate with women; the word itself derives from the Greek *hystera*, meaning womb. But no superstition that any group of women has ever believed has come close to the level of credulity and psychosis that seized the most educated male elite during the witch craze. As if in a deep hypnotic spell, men accepted as fact a phantasmagoria that defies comprehension—that little girls in pigtails, pregnant women, and weak, elderly widows posed a mortal danger to society. The witch craze was an example of masculine hysteria and gullibility without a parallel in any other culture. In the light of such evidence, lexicographers might well consider coining a new word to accompany 'hysteria'—'testicularia' would be appropriate. (Shlain, 1998, pp. 370–371)

The crucial term in the passage, above, is 'psychosis'. The theoretical basis of Shlain's argument regarding the correspondence between a (rapid) increase in literacy, on the one hand, and an upsurge in psychotic woman-hate, on the other, is painstakingly established and tested in various historical and cultural settings in *The Alphabet versus The Goddess* (Shlain, 1998; see also Olivier, 2005, 2008), always with astonishing confirmation of his thesis. For example, in illiterate Sparta, women had a social status virtually equal to men, while in (partially) democratic, literate Athens they ranked decidedly below men who were not slaves. Similarly, in ancient non-alphabetic Egypt, with its non-abstract, hieroglyphic, ideographic system of communication, free women enjoyed the same privileges as men. It is to be noted that Shlain is not positing a causal link between alphabet literacy and patriarchy; he does not claim causality, only correlation because of *association* and (often violent) social reinforcement of abstract masculine values, to the detriment of concrete feminine interests.

In the light of Shlain's perspicacious observations about this correlation, I want to posit another correspondence, although it has nothing to do with the right-brain and left-brain values he points to. Rather, the correspondence I have in mind seems to me to be related to an age-old correlation—that between irrational fear of 'contagious' nature and irrational, virtually psychotic hatred, as well as aggression, towards anyone perceived as embodying such contagion. I am referring to the current, excessive, collective fear of a viral pathogen that has been dubbed the 'novel coronavirus', and concomitantly the collective suspicion towards, and in some cases exclusion, if not persecution, of those people in societies across the globe who refuse to be 'vaccinated' against the virus, on the (illogical) pretext that the latter pose a threat against the 'vaccinated'. (I put 'vaccinated' in inverted commas because, arguably, the 'vaccines' in question are not really vaccines; the latter prevents infection by the intended pathogen as well as the capacity to infect others; these COVID-19 'vaccines' do neither—see Kennedy, 2021; Richardson, 2021.) Additionally, as in the case of the witch craze, where Shlain posits the brain-based, value-altering role of (previously unknown) printing technology as an

ineradicable factor in the genesis of the mass psychosis, today, too, one can discern the role of a commensurate technology—that of the pharmaceutical creation of novel (mRNA), 'leaky' 'vaccines', created by 'experts', as the preferred, if not the only, cure for the illness caused by the virus (Kennedy, 2021). This resonates with the belief in 'experts' who could identify witches during the persecution of women that Shlain (1998) writes about. What has to be added is that today this is occurring at a time when technology has become so pervasive that it is no exaggeration to claim that we live in an era of technocracy—the 'rule' of technology, which Martin Heidegger (1977) already perceived in the early 20th century.

The fear of something in nature that is infectious (and potentially lethal) goes back a long way; recall, for example, the Black Death (bubonic plague) of the 14th century CE, when people were infected when they came into contact with rodents and the plague-carrying fleas on them. Thomas Berry (1996) points out that an historical break with an older, more nature-friendly tradition in Christianity (St Thomas, St Francis) occurred around this time, when the world, specifically nature, was experienced as evil. 'This deep aversion to the natural world', he writes (1996, p. 3), 'has profoundly conditioned the entire western tradition ever since'. Is it far-fetched to see in the current, widespread fear of the coronavirus that allegedly causes the illness COVID-19, a recrudescence of this lingering fear of nature?

It is instructive in this regard to note Michael Hardt and Antonio Negri's elaboration on nature as it was represented in the work of the French author Céline:

> *It is interesting in Céline's* Journey *that the disease of colonial territories is a sign not really of death, but of an overabundance of life. The narrator, Louis-Ferdinand, finds that not only the population but moreover the African terrain itself is 'monstrous' (p. 140). The disease of the jungle is that life springs up everywhere, everything grows, without bounds… The disease that the colony lets loose is the lack of boundaries on life, an unlimited contagion.* (Hardt & Negri, 2000, p. 135; italics in original)

Their subsequent expansion on the link between globalisation and contagion resonates unmistakably (and uncomfortably) with the current global preoccupation with, and obsessive fear of infection under 'pandemic' circumstances:

> *The contemporary processes of globalization have torn down many of the boundaries of the colonial world…The dark side of the consciousness of globalization is the fear of contagion. If we break down global boundaries and open universal contact in our global village, how will we prevent the spread of disease and corruption? This anxiety is most clearly revealed with respect to the AIDS pandemic. The lightning speed of the spread of AIDS in the Americas, Europe, Africa, and Asia demonstrated the new dangers of global contagion… the dominant discourses of AIDS prevention have been all about hygiene: We must avoid contact and use protection… International and supranational projects to stop the spread of AIDS have tried to establish protective boundaries at another level by requiring HIV tests in order to cross national boundaries.* (Hardt & Negri, 2000, p. 136; italics in original)

Does this not sound eerily familiar? Limit contact ('social distancing'), use protection ('wear masks'), and control international boundaries ('vaccine passports')—except that these conditions under the current 'pandemic' have been exacerbated immeasurably. It is therefore understandable that, given these circumstances, something deserving the name of 'mass psychosis' appears to be afflicting societies globally today—similar to the one that prevailed during the witch hunts of the 16th and 17th centuries, to which one might add the period immediately preceding, and during, the Second World War in Nazi Germany, when Germans seemed mesmerised by Nazi ideology and largely condoned, if not participated in, its concomitant persecution of Jews (Shlain, 1998).

GROUP BEHAVIOUR, VACCINE EFFICACY, AND SAFETY

So, what is mass psychosis? Before focusing exclusively on it, one can already gain insight into its character as a collective psychic affliction from the discussion of Shlain's work, above, and Sigmund Freud's (2011; see also Olivier, 2019a) work on group psychology also casts light on it, in so far as several of his observations on the behaviour of groups resonate with the irrational behaviour one witnesses across the globe today regarding responses to the 'pandemic'. Where Freud distinguishes between 'unorganised' (or random) and 'organised' groups, we are clearly not dealing with the latter here, among the members of which he posits 'libidinal ties' because of 'identification' with 'leaders'. There is little evidence that such libidinal ties to a leader operate in the context of the 'pandemic', and therefore I believe it is sufficient to enlist Freud's (2011) approving reference to the work of Le Bon on the 'group mind', where the latter observes that a group's collective behaviour is completely distinct from that of the individuals making it up.

Usually, according to Le Bon, individuals in groups lose their 'higher', rational modes of functioning in favour of regressive behaviour. Contrary to individual behaviour (where rationality arguably plays a role most, if not all, of the time), groups are, as Freud (2011) reminds us, 'impulsive, changeable and irritable', are 'led… by the unconscious' (p. 3774), behave in ways that are un-premeditated, are uncritical and credulous, feel omnipotent, do not doubt themselves and tend to extremes, lack the inhibitions that individuals have, and show signs of regression to mental primitivity (e.g., tolerating contradictions, similar to the unconscious). Furthermore, he observes, they are susceptible to the 'magical power of words' (Freud, 2011) instead of reason, and *importantly for the present theme, desire illusions (like neurotics do) instead of truth*. Although it is not only the irrational behaviour of actual groups gathered in a geographical location that is considered here (although this also sometimes occurs), but mainly that of the extremely large, pro-'vaccination' 'group' of people spread across the globe, the question of illusion is particularly relevant here, in so far as it seems to apply to the readiness of the vast majority of people to accept prescriptive statements from 'experts' (as was the case with the witch hunts of the 16th century) like the arguably compromised Dr Fauci, American President Biden's chief medical adviser (as detailed in

Kennedy, 2021). The following approving comment by Freud on Le Bon's findings is just as relevant: '….in the mental operations of a group the function of testing the reality of things falls into the background in comparison with the strength of wishful impulses with their affective cathexis' (2011, p. 3775). Is this observation on Freud's part not highly pertinent to instances of ignoring incontrovertible evidence that contradicts the claims of mainstream media regarding the effects of lockdowns and particularly of the vaccines on people's health (Breaking News-CA. 2021a, 2021b, 2021c; Edeling, 2021; Kennedy, 2021)? Clearly, this phenomenon is a manifestation of the 'wishful impulses', and the resistance to 'testing the reality of things' that Freud talks about.

It is unnecessary to provide dozens of examples where evidence of the harm done by 'vaccines', for instance, reflect such wilful, irrational avoidance of 'testing reality' and 'wishful impulses'; to anyone interested in finding them, it is quite easy, as long as one does not avail oneself of mainstream media, which *themselves embody such avoidance*—instead of which reassuring falsehoods are routinely dished up to the masses. Take this report on proceedings in the South African parliament during a question-and-answer session with the president, Mr Cyril Ramaphosa, for example (Philips, 2021). Here is an excerpt from the article:

> The leader of the African Christian Democratic Party, Reverend Kenneth Meshoe, told the president that mandatory vaccinations for Covid-19 were unconstitutional and a breach of the rights of citizens to decline medical experimentation without their consent.
>
> 'Will you help prevent a new form of apartheid where unvaccinated people are being discriminated against and excluded from some places and will you defend their constitutional rights of those South Africans who choose not to get vaccinated?' he asked.
>
> Ramaphosa said, 'Nobody in the end should be forced to take the vaccine,' but added that constitutional rights were not absolute.
>
> He said that influential people like Meshoe were contributing to vaccine hesitancy through their public comments and undermining efforts to bring Covid-19 under control.
>
> 'For me it is bizarre, it's absolutely bizarre that when we are dealing with a pandemic that is killing people more directly in our eyes and faces, that we encourage people not to take the vaccine when it has been proven to save lives.' (paras. 4–5)

In this excerpt already, it is evident that more attention is given to the president's response to Meshoe than to the latter's own statement, which—from a discourse-analytical perspective—is revealing about the *Mail & Guardian*'s own position on this. Despite the contrary impression being created by the article's title, it actually pays more attention to statements that promote the taking of 'vaccines'. Apart from Ramaphosa's undisguised pro-'vaccine' stance, take this, for example:

> Last month, Business Leadership South Africa warned that more businesses were going to introduce mandatory vaccinations for employees.

> 'Those who refuse to be vaccinated may well proclaim that is their right, but it is also the right of the rest of us to protect ourselves from the risks posed by unvaccinated people and to do whatever we can to reach the overall vaccination rates necessary for life to go back to normal,' chief executive Busi Mavuso said in the organisation's weekly letter. (Philips, 2021, paras. 10–11)

To anyone who is routinely dependent on mainstream media for news and comment on the 'pandemic', this is certain to come across as unambiguous reinforcement of the putative safety of the 'vaccines'. Virtually without exception, other mainstream media echo this stance. Here is CNN—note the element of fearmongering, combined with pressure to be 'vaccinated' and implicit reassurance that the 'vaccines' are safe:

> Despite recent upticks in vaccination doses being administered, the reality that most countries will not hit that 80-90% [total vaccination] goal while the Delta variant spreads presents a serious threat. Not only does it affect the speed at which these specific countries can wave goodbye to Covid but, on a global level, it also creates an opportunity for the virus to spread, mutate and break their borders to countries with lower vaccination rates. In other words, it could incubate the next disaster in this pandemic. (McGee, 2021, para. 6)

In addition to 'vaccine' safety concerns, there is the matter of their vaunted efficacy in protecting recipients against COVID-19, which is, to say the least, dubious (Kennedy, 2021), despite numerous assurances to that effect from the World Health Organization (WHO) and governments. In a recent article (Richardson, 2021), for example, an account is given of a 'double-jabbed' woman who became one of many 'breakthrough' cases ('vaccinated' people who nevertheless get ill with COVID-19). Nevertheless, the article informs one that:

> Over 48 million people in the UK have received their first jab, with more than 75 per cent of adults now being double jabbed. Contrary to some popular misconceptions, Covid vaccines do not totally prevent you from catching the virus. They are important because they reduce your risk of getting seriously ill or dying, according to the NHS, and they do reduce your risk of catching or spreading it. As well as protecting against variants, such as the Delta variant. (Richardson, 2021, para. 4)

Evidently they are less effective (and safe) than the 'authorities' would want one to believe. In fact, it is becoming increasingly difficult to maintain the assurance that they are effective, as recent reports indicate. In an article tellingly titled 'How many double-jabbed people are dying from COVID' (Speare-Cole, 2021; see also Moss, 2021 for similar information), for instance, one finds this explanation (which is hardly reassuring, considering the unpredictability of the [side-]effects of being 'vaccinated'):

> More than 1,000 fully vaccinated people in England have died from the Delta variant between 1 February and 29 August, according to the latest data from Public Health England.
>
> In this time period, 37 people under the age of 50 who had been double jabbed and 1,054 over-50s have died after testing positive for the Delta variant – now the dominant strain of the virus in the UK.

> This compares to a total of 536 COVID deaths of unvaccinated people from all age grounds [sic] during that time.
>
> However, the higher number of fully vaccinated people dying does not mean that the vaccine is not working, but instead reflects the large majority of people in England who have now been jabbed. (Speare-Cole, 2021, paras. 1–4)

With the possibility in mind that one may die of COVID-19 despite having been 'fully vaccinated', as suggested by this report, the reassurance, that it 'does not mean that the vaccine is not working', rings hollow to say the least. Furthermore, regarding both those providing this information, and the vast majority of those consuming it (the 'vaccinated'), the message it gets across speaks volumes as far as 'wishful impulses', the (neurotic) desire for illusions, and the resistance to 'testing the reality of things', noted by Freud, are concerned. These tendencies are themselves already symptomatic of a collective condition that reflects anything but psychic equilibrium or a sober, rational appraisal of extant circumstances.

However, the instances, above, of ambivalent mainstream media reporting on COVID-19 deaths of 'fully vaccinated' people do not nearly convey the undeniably deleterious, if not lethal, effects of the COVID-19 vaccines on their recipients. For this one has to delve into alternative publications (Kennedy, 2021; Mercola & Cummins, 2021) and media. Looking at the website of journalist Chris Waldburger (Waldburger, 2021), for example, an article with the telling title and subtitle, 'Bombshell UK data destroys entire premise for vaccine push. The media can read just as well as me (maybe), but somehow it is left to me to report this', reports as follows on the contrast between the deaths of 'vaccinated' as opposed to 'unvaccinated' people:

> This is an absolute game-changer.
>
> The UK government just reported the following data, tucked away in their report on variants of concern:
>
> **Less than a third of delta variant deaths are in the unvaccinated.**
>
> Let me say that another way - **two-thirds of Delta deaths in the UK are in the jabbed**.
>
> To be specific:
>
> From the 1st of February to the 2nd of August, the UK recorded 742 Delta deaths (yes, the dreaded Delta has not taken that much life).
>
> Out of the 742 deaths, 402 were fully vaccinated. 79 had received one shot. Only 253 were unvaccinated…
>
> Again, 402 deaths out of 47 008 cases in vaccinated; 253 deaths out of 151 054 cases in unvaccinated. If you get covid having been vaccinated, according to this data, you are much more likely to die than if you were not vaccinated! (Waldburger, 2021, paras. 1–10; emphasis in original)

Waldburger also provides a link to the actual report, so that anyone can peruse it, the point being that the mainstream media ignore these revealing data scrupulously, lest it undermine their (shameful and unjustifiable) promotion of potentially lethal 'vaccines'. These deaths pertain to people who had received the 'vaccine' and subsequently died when they contracted COVID-19. There is even more disturbing information available in non-mainstream media on the deleterious effects of the 'vaccines' themselves, something carefully hidden by mainstream media, and/or scrubbed by armies of so-called 'fact-checkers' ('so-called' because they have been debunked as fraudulently working for companies whose interests they promote; Mercola, 2022b; reference available from the present author)—the COVID-19 era-counterpart of Orwell's 'thought police' in *1984* (Olivier, 2019b). On the alternative website of the (in Big Pharma-circles notorious) 'Health Ranger', Mike Adams, for instance, one finds an eloquent explanation, by Dr David Martin (2021), of the potentially lethal consequences of taking the COVID-19-'vaccines', titled 'Dr. David Martin – Covid vaccine mRNA code is a BIOWEAPON developed via a digital SIMULATION'. Similarly, Dr Vladimir Zelenko warns in no uncertain terms against the COVID-19 'vaccines'. On her (alternative) website, Dr Ariyana Love (2021) informs us that:

> A Nobel Prize nominee, Dr. Zelenko was censored and de-platformed across big tech for… affirming that Covid-19 is a 'bioweapon for mass Genocide'.
>
> 'The Covid-19 poison death shots create killer antibodies and killer antibodies are time bombs that get triggered by exposure to matching viral infections' says Dr. Zelenko. (paras. 4–5)

Nor are these two courageous doctors the only two speaking out against what they understand to be lethal injections, which, moreover, do not deserve to be called 'vaccines' (because they do not prevent one from being infected with the virus they are supposed to protect one against, nor do they prevent an infected person from infecting others). There are many such individuals who risk their reputations and jobs by taking a stance against the administering of these 'jabs'. Two more who should be mentioned are Dr Herman Edeling and Dr Peter McCullough (for more information on the thousands of doctors worldwide rejecting the 'vaccines' as being unsafe, if not lethal, see Olivier, 2021; see also Breaking-News CA 2021c). In a paper co-authored by Dr McCullough (Bruno et al., 2021; see also McCullough, 2021a for an explicit warning, that the COVID-19 'vaccines' are 'killing people'), the authors express the following misgivings about the COVID-19 'vaccines':

> COVID-19 encompasses a wide clinical spectrum, ranging from very mild to severe pulmonary pathology and fatal multi-organ disease with inflammatory, cardiovascular, and blood coagulation dysregulation…. In this sense, cases of vaccine-related ADE or immunopathology would be clinically-indistinguishable from severe COVID-19…. Furthermore, even in the absence of SARS-CoV-2 virus, Spike glycoprotein alone causes endothelial damage and hypertension in vitro and in vivo in Syrian hamsters by down-regulating angiotensin-converting enzyme 2 (ACE2) and impairing mitochondrial function…. Although these findings need to be confirmed in humans, the implications of this finding are staggering, as all vaccines authorized for emergency

> use are based on the delivery or induction of Spike glycoprotein synthesis. (Bruno et al., 2021, p. 5)

One does not have to be a scientist to grasp the seriousness of these scientists' warning against the use of the 'vaccines' in humans, given the observed deleterious effects of the spike glycoprotein that they contain in hamsters. It is astonishing, if not downright incomprehensible, that 'emergency use' was granted for them—on the supposition that the developers of these 'vaccines' had human recipients' health and welfare in mind.

South African Dr Herman Edeling also counts among those doctors who bravely challenge their government to face the demonstrable fact that the 'vaccines' are dangerous, and in many cases lethal. Among other things, Dr Edeling charges that 'vaccine' deaths are being suppressed, as highlighted by Nadya Swart (2021) in a BizNews article linked to his open letter and to an interview she conducted with him—which was quickly removed from YouTube when it was posted there (it can still be viewed via a link in the article by Swart). In his open letter to the South African president, Dr Edeling courageously writes (2021):

> 1.1. Since the onset of the COVID-19 pandemic the people of South Africa have suffered a major health crisis as well as a major economic crisis. The harmful effects of these crises, which have included widespread fear, confusion, feelings of helplessness, loss of freedoms, overwhelmed healthcare practitioners, insufficient hospital beds and equipment, loss of employment, financial ruin, severe physical and mental illness, disability and death, are massive and incalculable.
>
> 1.2. These harmful effects have been aggravated by official South African COVID-19 narratives, which seem in blind faith to echo the official narratives of the WHO, FDA, CDC as well as European, American, Canadian and Australian governments, inter alia.
>
> 1.3. The official South African COVID-19 narratives are strongly and repeatedly communicated by yourself and members of your national and provincial executives, as well as by representatives of institutions such as public health departments, universities, etc. that are directly or indirectly under your control or influence.
>
> 1.4. The mainstream media have jumped onto the bandwagon and continue to amplify these official narratives.
>
> 1.5. The mRNA 'vaccines' in current use are now scientifically linked to rising breakthrough infections, hospitalizations and deaths...In effect, the cure may become worse than the illness. Despite being denied by officials and mainstream media this news has spread via social media, and is one of the leading reasons for 'vaccine hesitancy'… (paras. 3–7)

Given the published work of these brave individuals (only some among many; for more on this see Olivier, 2021, 2022) who, risking their reputations, incomes, and more, draw attention to the dangers of the 'vaccines' and the manner in which these are covered up, one is faced with the obvious question: why have so many people complied, and still do, when told to 'get the shot'? Which brings one back to the question of 'mass psychosis', and whether one might

legitimately describe current beliefs and behaviour (under 'pandemic' conditions) in those terms.

MASS PSYCHOSIS

A concise and perspicacious account of the phenomenon of mass psychosis is encountered in a 20-minute video titled 'MASS PSYCHOSIS — How an Entire Population Becomes MENTALLY ILL', produced by After Skool and Academy of Ideas (2021; see also Neil Oliver, 2021). Confirming what was argued at the outset in this article about the parallel between the current state of affairs and the European 'witch craze' of the 16th and 17th centuries, the makers of this video actually note the same resemblance, also adding the other parallel, namely the rise of totalitarianism in the 20th century (think of the persecution of the Jews in Nazi Germany). They characterise 'mass psychosis' as an 'epidemic of madness' that emerges when a large percentage of a society somehow 'loses touch with reality' and develops a delusional outlook. They also note the moral and spiritual degeneration on the part of people who are drawn into the vortex of such a mass psychosis, which is accompanied by increasing unreasonableness, irresponsibility, emotional instability, and unreliability. Echoing the views of Le Bon and Freud on group behaviour (discussed earlier), it is pointed out that a psychotic group is likely to commit atrocities that individuals would normally refrain from. (This resonates with some of the video material circulating globally, not on mainstream media, but on social platforms like WhatsApp and Telegram, of unbelievable, quasi-psychotic—and morally speaking, unforgivable—behaviour of Australian police officers towards 'unvaccinated' people.)

The video voiceover also discusses the psychogenesis of the collective craze in question, noting the 'panic phase' on the part of individuals that are scared by inexplicable events. This is a clear reference to the quick succession of events that followed the outbreak of a virus epidemic in Wuhan, China, towards the end of 2019. In the wake of this, the 'novel coronavirus' rapidly spread around the world, accompanied by what was fear-inspiring pronouncements by the World Health Organization (WHO) and other health organisations, as well as governments, which resulted in national lockdowns of different degrees of severity (Olivier, 2021). Understandably this gave rise to what quickly became endemic fear of contagion and panic in the face of a deadly pathogen.

Moreover, in the development of mass psychosis, the video informs one, the initial panic typically makes way for a stage of 'psychotic insight', where fear-inducing experience is alleviated by the invention of an illogical, (quasi-)magical, and reassuring explanation of the (frightening) state of affairs. Under present 'pandemic' conditions this seems to apply to at least two things: the initial account of a natural, zoonotic origin of the virus, and the later, competing account of an accidental (but possibly deliberate), leak of a genetically engineered coronavirus, and secondly (more significantly), the present tendency, globally (on the part of

government representatives and the mainstream media), to play the 'vaccinated' off against the 'unvaccinated' with statements such as that we are witnessing 'a pandemic of the unvaccinated' (Centers for Disease Control and Prevention [CDC] Director Rochelle Walensky on NBC News, 2021). Someone who makes such statements ignores those virologists who point out that the 'unvaccinated' are not the ones who are causally responsible for the emerging so-called 'variants', but that these are attributable to the fact that the virus mutates in 'vaccinated' people, in response to the 'vaccines'. As stated by well-known virologist Geert Vanden Bossche (2021), 'Mass vaccination with imperfect vaccines is prone to promoting propagation of naturally selected, spike(S)-directed immune escape variants in the population, and ongoing campaigns are causing the population to place even more pressure on viral infectiousness.' (para. 5).

Nevertheless, to those who have fallen prey to the mass psychosis in question, putting the blame on the 'unvaccinated' seems like a stroke of genius that explains the fear-inducing situation. Addressing this situation by attempting to force the 'unvaccinated' to 'take the shot' seems to be a magical antidote to their own fears, but does not alleviate the mass psychosis; in fact, it exacerbates this condition.

In the video under consideration the concept of 'menticide'—the killing of the mind—is introduced to explain how large numbers of people are subjected to control. In the discussion it becomes clear that menticide amounts to the systematic destruction of the human spirit and of free, uncensored thought. The prior stage of fearmongering and social division or isolation prepares the way for menticide. This enables the ruling elite to impose its own (delusional) ideology on society, which functions to exacerbate the mass psychosis in question in so far as it offers a (misleading) framework for understanding the dystopian events that are occurring. It comes as no surprise, therefore, to find that, where menticide happens, totalitarianism is easily established; in fact, menticide is a constituent of totalitarian rule, in so far as a society constructed on delusions lends itself to totalitarianism.

The creators of the 'Mass Psychosis' video further discuss the highly relevant work of Joost Meerloo, who wrote *The Rape of the Mind* (2009). The pertinence of his work becomes apparent where they note that: 'Confusion heightens the susceptibility of a descent into the delusions of totalitarianism' (After Skool and Academy of Ideas, 2021, 11:53). Referring to the historical example of Adolf Hitler, Meerloo states that:

> There is another important weapon the totalitarians use in their campaign to frighten the world into submission. This is the weapon of psychological shock. Hitler kept his enemies in a state of constant confusion and diplomatic upheaval…Hitler was never logical, because he knew that that was what he was expected to be. Logic can be met with logic, while illogic cannot – it confuses those who think straight. The Big Lie and monotonously repeated nonsense have more emotional appeal in a cold war than logic and reason. While the enemy is still searching for a reasonable counter-argument to the first lie, the totalitarians can assault him with another. (2009, p. 70)

One might argue that we are not currently witnessing anything comparable to the fascist totalitarianism under Hitler that was responsible for the extermination of approximately 6 million Jews, and at present this may seem reasonable because no one knows with certainty how what I here argue is the 'mass psychosis' of the present will develop further. Yet, several things in Meerloo's observation strike one as being applicable to the present situation globally, specifically the use of 'psychological shock', or the periodic frightening of people with news of a 'new variant' of the coronavirus (ridiculed as 'scariants' by people who tend to be sceptical of such announcements), as well as 'monotonously repeated nonsense', such as that the wearing of masks and of 'social distancing' are essential (Mercola, 2022c; reference available from the present author). Any logically thinking person can grasp the nonsensical status of these when the same 'authorities' who insist on these measures allow one to remove one's mask as soon as one sits down in a restaurant, and countenance large numbers of people intermingling in shopping centres. The point is that all of these confusing directives contribute to a climate conducive to 'mass psychosis'.

Another writer worth reading on the advent of delusional psychosis on a massive scale today is psychiatrist Dr Mark McDonald (Mercola, 2021a; reference available from the present author; see also Cheah, 2020). This is what McDonald said on the advent of mass delusional psychosis in the course of the 'pandemic' in an interview, as quoted by Dr Mercola:

> *There was never a medical crisis. There were always enough resources to deal with the people who were sick… Many resources were in fact turned away… The question then, for me, became, 'What's the real crisis? What are people really suffering from?'*
>
> *It became clear to me, very quickly, within the first two or three weeks in March [2020], that it was fear. Since then… the fear… has morphed and evolved, not just into a 'I'm worried, I'm scared so I need to stay home,' but an actual belief that is against reality — because the definition of delusion is something you believe that doesn't conform with reality.*
>
> *They believe that they are going to die — no matter what age, no matter what state of health they're in — if they don't leave their house with a mask and gloves on every day and run from [other] human beings. That's delusional psychosis. It's false, it's wrong, it's not backed up by evidence. And many, many Americans are living that and believing that.* (2021a, paras. 13–15; reference available from the present author; italics in original)

This delusional behaviour is not restricted to America, of course. One witnesses it in virtually every country worldwide. The pervasive delusional condition explains the infantilism one witnesses around one, manifested in the manner that many (if not most) adults display regressive behaviour by adopting an otherwise inexplicable, virtually complete submissiveness to 'authorities', who strip them of the rights enshrined in their countries' constitutions, as well as in the *United Nations Declaration of Universal Human Rights*. As observed in the After Skool video discussed earlier, the flipside of such infantile submissiveness on the part of ordinary citizens afflicted with mass psychosis, is that the

equally deluded ruling elites usually believe that they have the knowledge *and* the right to exercise control over citizens in putatively democratic countries in a 'top-down' manner.

LACAN ON PSYCHOSIS AND PASSAGE Á L'ACTE

Finally, to be able to get a more nuanced grip on the concept of psychosis, I turn to the work of Jacques Lacan in two of his seminars—on *The Psychoses* (Lacan, 1993), and on *Anxiety* (Lacan, 2014), which provide somewhat divergent—but mutually enriching—perspectives, respectively, on the mass insanity of the present. First, it strikes one as pertinent to the current global outbreak of mass psychosis that Lacan observes, *vis-á-vis* the work of his erstwhile teacher, De Clérambault, that the latter was concerned to:

> demonstrate the fundamentally *anideational*…character of the phenomena that manifest themselves in the development of psychosis. What this means is *that which doesn't correspond to a train of thought*…This reference point is supposedly located, then, in terms of being understandable. The initial reference to understanding serves to decide exactly what it is that introduces a breach and appears as unintelligible. (Lacan, 1993, p. 6)

This explains something crucial about the emergence of the current collective insanity: the mass delusional behaviour of people who wax 'hysterical' (note the scare quotes; this is meant in the loose, everyday sense of the term; not the strictly clinical one) when faced by people's actions which contrast with their own, is seldom, if ever, the result of a 'train of thought'. On the contrary, their behaviour assumes the guise of an immediate, psychotic response to an image, including that of someone who is not wearing a mask, or someone who comes too close to them as measured by required social distancing rules, such as screaming uncontrollably at the offending person. Their behaviour is, then, in Lacan's words, 'unintelligible'. What is it, under present circumstances, that 'introduced a breach'?

One finds a clue where Lacan, referring to one of Freud's case studies, describes a boy having a hallucination that he has cut his finger badly with his knife while sitting with his nurse, and not 'daring' to tell her about this. Lacan elaborates:

> How significant is that suspension of all possible speech! – and precisely with the person [the nurse] he used to recount everything to, and especially things of that order! There is an abyss here, a temporal submersion, a rupture in experience, following which it turns out that he has nothing at all wrong with him, it's all over, let's drop the subject.
>
> The relation that Freud establishes between this phenomenon and this very special *knowing nothing of the thing, even in the sense of the repressed* expressed in this text translates as this – what is refused in the symbolic order re-emerges in the real. There is a close relation between, on the one hand, negation and the reappearance in the purely intellectual order of what has not been integrated by the subject and, on the other, *Verwerfung* [foreclosure] and hallucination, that is, the reappearance in the real of what the subject has refused. (1993, p. 13)

The clue in question is to be found where Lacan writes: 'There is an abyss here, a temporal submersion, a rupture in experience…' In other words, there is no intelligible sequence of events here. This applies primarily to psychotic hallucinations on the part of individual subjects and, as may be seen in the citation, above, are understood by Lacan as the effects of a psychic function that he calls 'foreclosure'—the complete rejection (*Verwerfung* is Freud's term) of something from the subject's psyche; not merely its 'repression' in the unconscious, as in the case of the aetiology of neuroses. In the seminar on the psychoses Lacan (1993; see also Evans, 1996) relates foreclosure causally to the rejection of the signifier that 'anchors' the symbolic system of language, namely what he calls 'the Name-of-the-Father', from the psychotic subject's symbolic horizon. Hallucination is a corollary of this in so far as the foreclosed signifier 'returns' in the register of the unsymbolisable 'real', disrupting the chain of language—in the case of the little boy, his hallucinatory experience of having nearly decapitated his finger, which he was incapable of articulating symbolically. Lacan expresses the relation between psychosis and the 'transcendental' signifier ('transcendental' in the sense of being the condition of the possibility of the system of language) as follows:

> Observe this crucial moment carefully and you will be able to pick out this passage in the onset of every psychosis – it's the moment at which from the Other as such, from the field of the Other, there comes the interpellation of an essential signifier that is unable to be received. (1993, p. 306)

The 'Other' for Lacan represents the unconscious, repressed field of cultural values embedded in the symbolic register, and his thesis is that the signifier which functions as the 'quilting point' or nodal 'anchor' to this entire symbolic system—the 'Name-of-the-Father'—is 'rejected' ('unable to be received') when it 'interpellates' or interruptively addresses the subject, as was the case with Freud's psychotic Judge Schreber. This is the 'breach' or 'rupture' referred to earlier, which interrupts and undermines sequences of intelligibility, giving rise to psychotic delusions or hallucinations. This may seem to apply largely to instances of individual psychosis, and apart from the notion of a breach of intelligibility, it does not appear to go very far in explaining the emergence of the *mass* psychosis we are witnessing today. I shall return to this.

How does one account for the emotional outbursts that so often accompany such psychotic behaviour? Here is a reported example, from a colleague (at the university where I work) who was singled out by a pro-'vaccine' colleague because of the former's insistence that one should have the right to choose *not* to be 'vaccinated' (I have omitted my colleague's name to protect their privacy):

> On Oct 25 2021, at 8:13 pm, [my colleague] wrote:
>
> Dear All

> Thank you for all the e-mails going around today. I did not respond as I was the target of quite a vicious emotional attack from a colleague this morning, so, I had to deal with some emotions. (Author's colleague, personal communication, October 25, 2021)

To grasp this, one has to peruse Lacan's seminar on *Anxiety* (2014), specifically his account of the '*passage á l'acte*' ('passage to the act'), which represents a different approach to the question of how to understand the currently pervasive mass psychosis. What does Lacan mean by '*passage á l'acte*'? He writes:

> The moment of the *passage á l'acte* is the moment of the subject's greatest *embarrassment*, with the behavioural addition of *emotion* as a disorder of movement. It is then that, from where he is – namely, the locus of the stage where alone, as a fundamentally historicized subject, he is able to maintain himself in his status of subject – he rushes and topples off the stage, out of the scene.
>
> This is the very structure of the *passage á l'acte.* (2014, p. 115)

Lacan's dramatic metaphor of the stage, from which the 'embarrassed' subject 'rushes', is borrowed from a case of Freud (as he acknowledges), where a young, homosexual woman ('Dora')—who was embarrassed by her father seeing her in the company of the woman she loved, and casting her an unmistakeably disapproving glance, upsets her beloved to the point of the latter's exasperation—hastened away from the scene and threw herself over a parapet onto a tram- or railway-line in an attempt at suicide. It is important to note that this colourful scene exemplifies the 'structure of the *passage á l'acte*', that is, a *structure* that is shared by all such 'acts'.

In the seminar on *Anxiety*, Lacan (2014) proceeds to draw a distinction between the phenomena of *passage á l'acte* and 'acting out' ('ausagieren', in Freud's terms), in relation to anxiety. What they have in common is that both are extreme responses to anxiety, but they differ in so far as Lacan locates the subject who 'acts out' *in* the 'scene', while the subject who traverses a 'passage to the act' *leaves* the scene completely (exemplified in Dora's attempted suicide). What this enigmatic distinction means is that 'acting out' occurs *within* the realm of the symbolic, and embodies what Lacan thinks of as a 'symbolic message' to the (big) Other—his term for the unconscious field within which societal norms and the 'moral law' are embedded (Evans, 1996; see Olivier, 2017, for an elaboration of this in the context of student protests in South Africa, seen as 'symbolic messages'). By contrast, an instance of the *passage á l'acte* instantiates an *exit* from the symbolic field, and therefore a suspension of the social bond altogether. Put differently, it is a flight from the symbolic into the realm of the unsymbolisable 'real'; hence the purely 'physical' occurrence of 'falling down' or 'fleeing'. It is significant that, as Dylan Evans (1996) reminds one, Lacan does not see the 'passage to the act' (p. 140) as necessarily indicating a primary psychosis, although it does imply a temporary suspension or dissolution of the subject, in the place of which a 'pure object' momentarily remains.

One thing remains to be added here, which concerns the role of what Lacan calls the *objet petit a* (*a*, 'object *a*', or 'little other object'). If the subject is dissolved into an *object* of sorts in the 'passage to the act', what is the status and function of this 'object'? The following passage from the *Anxiety* seminar is pertinent to understanding its role:

> What occurs then is the subject's absolute identification with the *a* to which she is reduced. Here it is a matter of the confrontation between the father's desire, upon which her entire conduct is built, and the law which is presentified in the father's gaze. This is what leads her to feel definitively identified with *a* and, by the same token, rejected, evacuated, from the stage. And only the being dropped, the *letting oneself drop*, can realize this. (Lacan, 2014, p. 111)

The subject is reduced to an *a*, or 'object *a*' through the 'passage to the act'. Here it is relevant that, in Lacan's lexicon, the 'object *a*' manifests 'a lack' (Lacan, 2014, p. 107). He elaborates:

> What is the object *a* at the level of what subsists as a body and which hides from us, so to speak, its will? This object *a* is the rock that Freud speaks of, the final irreducible reserve of libido…
>
> In what place does the *a* stand? At what level could it be recognized, if indeed this were possible?...
>
> Indeed, the object is bound to its necessary lack right where the subject is constituted in the locus of the Other… (p. 107)

Put more plainly, in the 'passage to the act' the subject—in Lacan's Freudian example, the young lesbian woman, Dora—occupies the place of the object *a* in correlation with the patriarchal, moral 'law' (embodied in the father's disapproving look), which represents the 'locus of the [unconscious, repressed, social] Other'. This explains why, as object *a*, she is 'evacuated', reduced to a 'lack' which, simultaneously, represents the 'final irreducible reserve of libido'. As object *a* (or 'lack'), in the sense of having been emptied of symbolic significance, it (or she as object *a*) nevertheless instantiates the point from the perspective of which the father's desire (which represents that of the Other) can be understood. This makes of her the object of (his) desire, that is, as object *a*. As Evans (1996) reminds one, this also means that, for Lacan, the object *a* is not so much what *is* desired, but rather the object-cause *of* desire. Hence Dora, flaunting her (unconventional) love-attachment to a woman in public, functions as the *object-cause* (object *a*) of her father's (conventional) desire in a negative sense, which is why, correlatively, his disapproving gaze reduces her to an object *a*.

IMPLICATIONS FOR CURRENT MASS PSYCHOSIS

What does Lacan's reflections on psychosis and the *passage á l'acte* teach one regarding the current mass delusional psychosis under 'pandemic' conditions? Recall that in the previous section I wrote about lockdowns that gave rise to rampant fear of contamination and panic at the thought of a deadly pathogen that was likely to kill people, giving rise to 'psychotic

insight', where fear makes way for reassuring explanations regarding the origin of the terrifying state of affairs, to which one may add the further reassurances offered by the development of the 'vaccines'. Recall, too, Dr McDonald's (Mercola, 2021a: reference available from the present author) observations on the manifestations of mass delusional psychosis in the course of the 'pandemic', particularly that people became so scared that they believed they should 'stay home', and that 'they are going to die' regardless, 'if they don't leave their house with a mask and gloves on every day and run from [other] human beings'. Tellingly, he added: 'That's delusional psychosis' (paras. 14–15).

Seen in the light of Lacan's theorising on psychosis, this collective insanity of people who (by all accounts, and as personally experienced by myself) react emotionally when confronted by others who don't wear masks, or do not observe social distancing rules, for example, is clearly not the result of a 'train of thought', but rather (as remarked earlier) a quasi-psychotic response to a specific, unbearable image (of people who deviate from obsessively followed patterns of psychotic behaviour). Lacan contends that their behaviour is, in ordinary terms, 'unintelligible', except if one considers that something 'introduced a breach' of some kind. Earlier I mentioned that it may seem not to be valid for '*mass* psychosis', and yet, I would contend that, in so far as it is *individuals* who behave in unintelligible ways when confronted by unmasked people in social space today, what we have here are precisely *individual* manifestations of mass psychosis that may be understood as 'the interpellation of an essential signifier that is unable to be received' (Lacan, 1993, p. 306). The interpellating signifier in question, which is inseparable from the anchoring signifier of the 'Name-of-the-Father' (in 'the field of the Other'), and which addresses the psychotic subject, assumes the form of the (Kantian) 'categorical imperative' or ethical injunction, to treat others in a manner that is *universalisable*. Except…under current circumstances this imperative cannot 'be received'; that is, it is rejected, foreclosed, as shown by the psychotic subject hallucinating the putatively lethal status of the 'unmasked other' (who is therefore implicitly not treated as fellow human being).

What about the implications of the *passage á l'acte*? Just as Dora occupies the place of the object *a* in relation to 'the moral law' as instantiated in her father's disapproving gaze (which represents the unconscious, repressed, social Other), the dissenting, unmasked subject under the 'pandemic' assumes this position of disapproval, which temporarily reduces the quasi-psychotic, mask-wearing subject to the position of the object *a*, of a 'lack' in terms of symbolic significance. Recall that, according to Evans (1996, 140), Lacan does not associate the 'passage to the act' definitively with a primary psychosis, but with a temporary 'suspension' of the subject, in the place of which a 'pure object' briefly remains. This is why I used the term 'quasi-psychotic' above. Moreover, just like Dora, the quasi-psychotic, *emotional*, mask-wearing subject functions as the object-*cause* of the (mask-less) subject's unconscious desire, where the latter indicts the former morally in so far as it (the mask-less subject's desire) represents the Other and hence, the moral law. Ironically, the emotional, quasi-psychotic subject

imagines itself as occupying the latter position, but its 'falling down' or 'disappearance from the scene' marks it as the object *a*. This also accords with Lacan's reference to the presence of emotion.

PSYCHOTHERAPY

As to the question concerning the possibility of therapeutic actions in the face of the mass delusional psychosis that still has the world in its grip in early 2022, the first thing to note is that the preceding sections of this article already have therapeutic value in so far as they contribute to an identification of the source(s) of the collective craze besetting the world, as well as to understanding it. When one has an intellectual grasp of something, one has a better chance of addressing it efficaciously. One should note, too, that what Dr Peter McCullough (2021b) tellingly calls 'therapeutic nihilism' (a reference to the experimental, highly dangerous, evidently pseudo-vaccines recommended worldwide as the appropriate treatment against COVID-19) is *not* what society needs at present—in fact, this 'therapeutic nihilism' is one of the aetiological constituents of the collective psychosis. One would benefit from heeding the advice in the video from After Skool (2021) in this regard, before nuancing it further by means of psychoanalytical theory, because it paves the way for the latter.

In the video the question is posed: '…can the effects of mass psychosis be reversed?' Answering in the affirmative, it is emphasised that the response to the 'multipronged' menticidal approach, which causes the mass psychosis in the first place, must be equally multipronged. In Jungian fashion, the video advocates a primary 'centring' of oneself, which enables one to live in such a manner as to 'provide inspiration for others to follow'—in other words, to be someone others can identify with. Carl Jung is quoted to this effect:

> It is not for nothing that our age cries out for the redeemer personality, for the one who can emancipate himself from the grip of the collective psychosis and save at least his own soul, who lights a beacon of hope for others, proclaiming that here is at least one man who has succeeded in extricating himself from the fatal identity with the group psyche. (After Skool and Academy of Ideas, 2021, 17:53)

One cannot argue with the compelling force of a personality who acts in a conspicuously moral or ethical manner, sometimes confronting ostensibly unconquerable forces in the process. Under current circumstances there are several such individuals, such as Dr Reiner Fuellmich, Robert Kennedy (Jr), Dr Joseph Mercola, Prof. Dolores Cahill, Dr David Martin, and Dr Peter McCullough, to mention only six among many. To follow their exemplary leadership-through-action against the perpetrators of demonstrable injustices against humanity (such as Pfizer, Moderna, the World Economic Forum, the WHO, the CDC, and others; Kennedy, 2021; Mercola & Cummins, 2021; Olivier, 2021) today, is indeed one way to resist the effects of the mass delusionary psychosis pervading society.

Secondly, in the After Skool video (2021; see also Mercola, 2021a; reference available from the present author), one is encouraged to 'share and spread the truth', which is specified as

'the counternarrative to the propaganda', as much as possible, given the perpetrators' incessant censoring of the truth (Mercola, 2022b; reference available from the present author). It is also recommended that this be combined with humour and ridicule of the ruling elite, in the process delegitimising their rule. Reference is made to a book (*The Power of the Powerless*) by Vaclav Havel (1990), the erstwhile president of the Czech Republic, who suggested working through 'parallel structures', that is, any kind of organisation, movement, or even alternative technology that can exist within a totalitarian society, but importantly, is *outside* of it, morally speaking. Such parallel structures can lay the foundation for 'a parallel culture' that can fulfil the role of 'a sanctuary of sanity within the totalitarian world'. Particularly pertinent for present purposes are these words by Havel, where he writes about 'living within the truth':

> living within the truth becomes the one natural point of departure for all activities that work against the automatism of the system. And…such activities ultimately grow beyond the area of living within the truth (which means they are transformed into various parallel structures, movements, institutions, they begin to be regarded as political activity, they bring real pressure to bear on the official structures and begin in fact to have a certain influence on the level of real power)… (1990, p. 61)

This should, I believe, be regarded as very significant for therapy in the face of an unconscionable onslaught against our very humanity by forces that do not even have the courage to come out into the open, but instead work through a medical tyranny and its intermediate administrators. However, what does 'living within the truth' ultimately mean? Havel again, where he contrasts 'living within a lie' with 'living within the truth' in a manner that resonates audibly with the degraded time of the present global crisis:

> The profound crisis of human identity brought on by living within a lie, a crisis which in turn makes such a life possible, certainly possesses a moral dimension as well; it appears, among other things, as a deep moral crisis in society. A person…whose identity is dissolved in an amalgam of the accoutrements of mass civilization, and who has no roots in the order of being, no sense of responsibility for anything higher than his or her own personal survival, is a demoralized person. The system depends on this demoralization, deepens it, is in fact a projection of it into society.
>
> Living within the truth, as humanity's revolt against an enforced position, is, on the contrary, an attempt to regain control over one's own sense of responsibility. In other words, it is clearly a moral act, not only because one must pay so dearly for it, but principally because it is not self-serving: the risk may bring rewards in the form of a general amelioration in the situation, or it may not. In this regard, as I stated previously, it is an all-or-nothing gamble. (Havel, 1990, p. 62)

Although written in the Czechoslovakia of the 1970s, long before the advent of the 'pandemic', the applicability of Havel's words to our current situation is undeniable, and I would like to stress their therapeutic value, keeping in mind that Havel himself personified the person who lives 'within the truth', exposing what it means to 'live within a lie'. This is all

the more important because, as emphasised in After Skool (2021), the totalitarian elite does not waste time to expand and reinforce their power (Kennedy, 2021); hence, to counteract this, those who have the courage to 'live within the truth' have to act in a conspicuously sane, creative manner to inaugurate the 'parallel structures' which can embody a preferable alternative to the *status quo* of mass psychotic behaviour as correlate to totalitarian rule.

THE PERTINENCE OF PSYCHOANALYSIS

The work of psychoanalytical thinkers, Julia Kristeva, Jacques Lacan, and Ian Parker, is an invaluable source to draw on regarding questions of therapy in the face of pervasive, ever encroaching collective insanity. In particular, Kristeva's notion of 'revolt' instantiates a powerful reminder of what human beings are capable of when confronted by ostensibly overwhelming odds. When asked for clarification of this concept in an interview, she responded as follows:

> In contemporary society the word revolt means very schematically political revolution. People tend to think of extreme left movements linked to the Communist revolution or to its leftist developments. I would like to strip the word 'revolt' of its purely political sense. In all Western traditions, revolt is a very deep movement of discontent, anxiety and anguish. In this sense, to say that revolt is only politics is a betrayal of this vast movement…Therefore if we still want to conquer new horizons, it is necessary to turn away from this idea and to give the word revolt a meaning that is not just political. I try to interpret this word in a philosophical and etymological sense. The word revolt comes from a Sanskrit root that means to discover, open, but also to turn, to return. (Kristeva, 2002, pp. 99–100)

To be sure, in the present context it would be understandable to wish for a far-reaching political revolution that would effectively remove the alienating, prevailing conditions (large-scale, delusional compliance with imperatives concerning lockdowns, social distancing, mask wearing, and 'vaccination'). However, it must kept in mind that, even when collective resistance to these conditions grows, without 'revolt' at a personal, individual level—that is, a willingness to be open to an alternative mode of existence, to 'return' to oneself in the sense of re-discovering one's own capacity for surpassing the strictures emanating from the pro-'vaccination' lobby—such a revolution is unthinkable. Moreover, 'revolt' of this kind is a prerequisite for happiness, as Kristeva insists:

> Happiness exists only at the price of a revolt. None of us has pleasure without confronting an obstacle, prohibition, authority, or law that allows us to realize ourselves as autonomous and free. The revolt revealed to accompany the private experience of happiness is an integral part of the pleasure principle. (2000, p. 7)

One should note, in particular, the connection she draws between 'revolt' and one's 'autonomy' as a (morally) free human subject; all totalitarian rule—whether under Nazi rule in early 20th century Germany, the Stalinist dictatorship in Russia, the fictional varieties of Margaret Atwood's 'Republic of Gilead', and George Orwell's *1984* (Olivier, 2019a), or the

current medical tyranny—per definition reduces political subjects to a condition of abject heteronomy. One should not forget that, under such conditions, the quest for autonomy via 'revolt' is bound to be met with attempts at subjugation, or worse. This is no reason to refrain from 'revolt' in the Kristevan sense, however, as Jacques Lacan teaches one.

It may appear incongruous, but according to Lacan, *even if one should lose one's life* in the process, resisting or revolting against an unjust or totalitarian power may yield the kind of 'surplus pleasure' (that he calls '*jouissance*') of the kind noted by Kristeva. Surely this is impossible, one may retort. Structurally speaking, an event of this kind occurred in the massive revolt that slaves launched under the leadership of the gladiator-slave, Spartacus, against the might of Rome in 72–71 BCE (Mallory, 1971), at the end of which he and thousands of his followers were executed by the Romans. This epitomises what Lacan names 'the revolutionary's choice: freedom or death!'—a situation which entails a win-win scenario, unlike the so-called 'mugger's choice' ('Your money or your life!'), which is a lose-lose situation (Copjec, 2002). How so? Because it is better to fight (and perchance die) for freedom from inhuman suffering under tyrannical oppression, than to tolerate it: if you acquiesce in suffering, you don't live a properly *human* life. It is better to resist, which may result in freedom from oppression (winning), or in death, which frees one from such inhuman suffering as well (winning). Hence the 'pleasure' (or *jouissance*) accompanying it. Hence also the convergence of *jouissance* and 'revolt'. It is no exaggeration to claim that, under present circumstances, if one actively opposes and resists the pervasive mass psychosis, together with the conditions that have caused it, one may have to make the revolutionary's choice. Those people who have bowed under repressive regulations and have 'taken the jab', have ostensibly made the 'mugger's choice', with a twist: they believe that they have chosen life, but with the latest mortality figures (of the 'vaccinated') from England in mind, they may be in for a nasty surprise (The Exposé, 2022).

CONCLUSION

In retrospect, the therapeutic value of these two psychoanalytical perspectives on the collective madness surrounding one today amounts to what Ian Parker (2011) conceives of broadly as a reconfiguring of one's relationship with power—in this case (judging by the available evidence) a relentless power intent on subjugating the human race unconditionally through medical tyranny. Emphasising that this is an interminable process, Parker's thinking resonates with Kristeva's on 'revolt' where he writes:

> Lacanian clinical psychoanalysis does not solve the riddle of whether the spirit of revolt can take the place of the revolt of spirit against capitalism today. However, Lacanian work can be taken forward in order to reflect on its own practice and on the limits to what it can claim to do. Theoretical advance in its therapeutic practice is predicated on a theory of revolution that occurs outside the clinic, even if the paradoxical point of connection is a point at which we learn about the necessary disjunction between the two spheres of action. The kind of revolution in

> subjectivity that occurs inside the clinic makes of the clinic a quite specific site of refusal…It gives birth to glimmering, fading, and glimmering again of a subject open to change, to subjectivity in revolution. (Parker, 2011, pp. 198–199)

Needless to say, one can substitute 'totalitarian rule' for 'capitalism' in the quotation, above, with the corollary that whatever occurs within the clinic is at best a *preparation* for revolutionary action outside the clinic—that is what the 'necessary disjunction between the two spheres of action' implies. The 'refusal' within the clinic can pave the way for a 'refusal' outside the clinic. Today we are rapidly approaching a point where such refusal should take shape in decisive social action, lest we reach a point where it would be difficult (albeit not impossible) for the human spirit to overcome fearsome odds. In this regard, Dr Joseph Mercola's words are reminiscent of Lacan's 'revolutionary's choice':

> Just how much freedom are you willing to lose? Don't think for a minute that it'll all end once you get fully vaccinated against COVID-19. Sooner or later, everyone will have to make a choice: freedom or slavery. There's no middle ground anymore. (2021b, para. 47; reference available from the present author)

We are therefore facing a 'crisis' in the Greek sense of *krisis*, which means 'a turning point'. It is up to humans themselves to decide in which direction we turn—'overcoming' or 'going under'. At times like these, Margaret Atwood never fails to inspire me with her immortal words from *The Handmaid's Tale* (1985, p. 47), namely: '*Nolite te bastardes carborundorum*!' ('Don't let the bastards grind you down!'). That in itself is therapeutic.

REFERENCES

After Skool and Academy of Ideas. (2021, August 4). M*ass psychosis — How an entire population becomes mentally ill* [Video]. YouTube. https://www.youtube.com/watch?v=09maaUaRT4M

Atwood, M. (1985). *The handmaid's tale*. https://nz1lib.org/book/1650357/5212a4

Berry, T. (1996, April 11). *The university: Its response to the ecological crisis*. [Paper delivered before the Divinity School and the University Committee on Environment at Harvard University]. http://ecoethics.net/ops/berrybio.htm

Breaking News-CA. (2021a, May 10). *57 top scientists and doctors release shocking study on covid vaccines and demand immediate stop to all vaccinations*. https://breaking-news.ca/57-top-scientists-and-doctors-release-shocking-study-on-covid-vaccines-and-demand-immediate-stop-to-all-vaccinations/

Breaking News-CA. (2021b, May 3). *1,000 lawyers and 10,000 doctors have filed a lawsuit for violations of the Nuremberg code.* https://breaking-news.ca/the-new-nuremberg-trials-2021-please-share-this-info/

Breaking News-CA. (2021c, September 5). *Must watch: Nurses speak out at town hall meeting on Covid-19 vaccine injuries – Lack of reporting to VAERS* [Video]. https://breaking-news.ca/must-watch-nurses-speak-out-at-town-hall-meeting-on-covid-19-vaccine-injuries-lack-of-reporting-to-vaers-video/

Bruno, R., McCullough, P., i Vila, T. F., Henrion-Caude, A., García-Gasca, T., Zaitzeva, G. P., Priester, S., Martínez Albarracín, M. J., Sousa-Escandon, A., López Mirones, F., Payeras Cifre, B., Zaragoza Velilla, A., Borini, L. M., Mas, M., Salazar, R., Schinder, E., Yahbes, E. A., Witt, M., Salmeron, M., … Acevedo-Whitehouse, K. (2021, May 9). *57 top scientists and doctors: Stop all covid vaccinations.* Assets Global. https://assets-global.website-files.com/606d3dece4ec3c3866cc798a/60a5ff1fd9f50f42f696aec6_23%20Fifty%20Seven%20Top%20Scientists%20and%20Doctors.pdf

Cheah, S.G. (2020, December 22). *Psychiatrist: Americans are suffering from 'mass delusional psychosis' because of Covid-19.* Evie Magazine. https://www.eviemagazine.com/post/americans-are-suffering-from-mass-delusional-psychosis-because-of-covid-19

Copjec, J. (2002). *Imagine there's no woman. Ethics and sublimation.* The MIT Press.

Edeling, H. (2021, August 10). *COVID-19 pandemic – health and economic crises. Open letter to President Ramaphosa.* EMLCT. https://emlct.com/index.php/covid-19-pandemic-health-and-economic-crises-open-letter-to-president-ramaphosa/

Evans, D. (1996). *An introductory dictionary of Lacanian psychoanalysis*. Routledge.

Freud, S. (2011). *Freud – Complete works.* Ivan Smith.

Gadamer, H-G. (2004). *Truth and method* (J. Weinsheimer, & D.G Marshall Trans., 2nd revised ed.). Continuum.

Hardt, M. & Negri, A. (2000). *Empire*. Harvard University Press.

Havel, V. (1990). The power of the powerless. In J. Vladislav (Ed.), *Living in truth* (pp. 36–122). Faber and Faber.

Heidegger, M. (1977). The question concerning technology. In W. Lovitt (Trans.), *The question concerning technology and other essays* (pp. 3–35). Harper Torchbooks.

Kennedy, R. F. (Jr). (2021). *The real Anthony Fauci. Bill Gates, big pharma and the global war on democracy and public health*. Skyhorse Publishing.

Kristeva, J. (2000). *The sense and non-sense of revolt: The powers and limits of psychoanalysis, Vol. I* (J. Herman, Trans.). Columbia University Press.

Kristeva, J. (2002). *Revolt, she said. An interview by Philippe Petit* (Rainer Ganahl & Rubén Gallo, B. O'Keeffe, Trans.). Semiotext(e).

Lacan, J. (1993). *The seminar of Jacques Lacan, Book III: The psychoses 1955–1956* (R. Grigg, Trans.). W.W. Norton & Company.

Lacan, J. (2014). *Anxiety. The seminar of Jacques Lacan*, *Book X* (A.R. Price, Trans.). Polity Press.

Love, A. (2021, August 27). *Graphene oxide detox protocols for the vaxxed and unvaxxed.* Ambassadorlove. https://ambassadorlove.wordpress.com/2021/08/24/graphene-oxide-detox-protocols-for-the-vaxxed-and-unvaxxed/

Martin, D. (2021, September 1). *Dr. David Martin - Covid vaccine mRNA code is a bioweapon developed via a digital simulation.* Health Ranger Report. https://www.brighteon.com/309412a4-65e5-4bd6-a7c9-52805b5a6b93

McCullough, P. (2021a, March 11). *Top COVID Doc Peter McCullough: 'These jabs are killing people'.* Principia Scientific International. https://principia-scientific.com/top-covid-doc-peter-mccullough-these-jabs-are-killing-people/

McCullough, P. (2021b, October 2). *Winning the war against therapeutic nihilism and the rush to replace thrusted treatments with untested novel therapies* [Presentation]. AAPS 78th annual meeting, Pittsburgh, PA, United Stateshttps://aapsonline.org/aaps-78th-annual-meeting-recap-videos/

McGee, L. (2021, September 4). *Vaccine slowdowns in the wealthy West could incubate the next disaster in the Covid crisis.* CNN Health. https://edition.cnn.com/2021/09/04/health/vaccine-rollout-slowdown-intl-cmd/index.html

Mallory, J. (1971). *Collins Gem dictionary of biography*. Collins.

Meerloo, A.M. (2009). *The rape of the mind.* Pyreaus.

Mercola, J. (2021a, October 7). *The world is suffering from mass delusional psychosis.* Dr Mercola.

Mercola, J. (2021b, November 2). *How to fight vaccine mandates and passports.* Dr Mercola.

Mercola, J. (2022a, April 11). *Over 100000 released documents expose COVID origin fraud.* Dr Mercola.

Mercola, J. (2022b, March 10). *Who needs the fake fact-checkers?* Dr Mercola.

Mercola, J. (2022c, April 27). *Mindless mask mandates are over.* Dr Mercola.

Mercola, J. & Cummins, R. (2021). *The truth about COVID-19 – Exposing the great reset, lockdowns, vaccine passports, and the new normal*. Chelsea Green Publishing.

Moss, R. (2021, September 8). *Why the latest Covid death data is not all it seems*. Yahoo News. https://uk.news.yahoo.com/why-latest-covid-death-data-115025200.html

NBC News. (2021, July 16). *CDC Director Walensky warns of 'pandemic of the unvaccinated'* [Video]. YouTube. https://www.youtube.com/watch?v=YkZym2WLd9k

Oliver**,** N. (2021, August 28). *Neil Oliver: 'The West is firmly in the grip, not of a virus, but of delusional madness'*. YouTube. https://www.youtube.com/watch?v=kJZ8Brf5vNA

Olivier, B. (2005). Re-affirming the value of the image, and its social implications: Shlain and Lacan. *Communicatio (South African Journal for Communication Theory and Research), 31*(1), 141–154.

Olivier, B. (2008). Women's 'nature' and architectural design. *South African Journal of Art History*, *23*(3), 66–74.

Olivier, B. (2017). Protests, 'acting-out', group psychology, surplus enjoyment and neoliberal capitalism. *Psychology in Society (PINS) 53*, 30–50. http://www.pins.org.za/pins/pins53/olivier.pdf

Olivier, B. (2019a). Freud on group psychology and leaders: The case of Donald Trump. *Psychotherapy and Politics International*, 2020, Advance online publication, 1–13. https://doi.org/10.1002/ppi.1569

Olivier, B. (2019b). Religious authoritarianism and/or 'instrumentarian' technical surveillance: *The handmaid's tale* and *1984. Alternation – Interdisciplinary Journal for the Study of the Arts and Humanities in Southern Africa*, Special Edition 28, 10–37. http://alternation.ukzn.ac.za/Files/articles/special-editions/28/02-Olivier-F.pdf

Olivier, B. (2020). *Why nothing seems to matter any more: A philosophical study of our nihilistic age*. Montagu House.

Olivier, B. (2021). The 'pandemic' and the *differend. Phronimon – Journal of the South African Society for Greek Philosophy and the Humanities, 22*, 1–35. https://upjournals.co.za/index.php/Phronimon/article/view/9764/5124

Olivier, B. (in press). Massive deception masquerading as information and communication: A (largely) Derridean perspective. *Phronimon - Journal of the South African Society for Greek Philosophy and the Humanities, 23*.

Parker, I. (2011). *Lacanian psychoanalysis. Revolutions in subjectivity*. Routledge.

Philips, T. (2021, September 3). *MPs condemn mandatory vaccinations for employees.* Mail & Guardian.https://mg.co.za/news/2021-09-03-mps-condemn-mandatory-vaccinations-for-employees/

Richardson, H. (2021, September 5). *'After everything that has happened, I was in total shock': The double-jabbed people catching Covid.* The Independent on Yahoo News. https://uk.yahoo.com/news/everything-happened-total-shock-double-060000576.html

Shlain, L. (1998). *The alphabet versus the goddess. The conflict between word and image*. Penguin Arkana.

Speare-Cole, R. (2021, September 7). *How many double-jabbed people are dying from Covid?* Yahoo News. https://uk.news.yahoo.com/how-many-double-jabbed-people-are-dying-from-covid-151218361.html

Swart, N. (2021, September 15). *'Vaccine deaths are being hidden, suppressed and falsely recorded' – Dr Herman Edeling.* BizNews. https://www.biznews.com/thought-leaders/2021/09/15/vaccine-deaths

The Exposé. (2022, March 1). *Whilst you've been distracted by Russia's invasion, the UK gov. released a report confirming the fully vaccinated now account for 9 in every 10 Covid-19 deaths in England.* https://dailyexpose.uk/2022/03/01/russia-distraction-uk-gov-revealed-triple-vaccinated-account-9-in-10-covid-deaths/

Vanden Bossche, G. (2021, October 25). *Why can't C-19 vaccine mandates be taken seriously?* Voice for Science and

Solidarity.https://www.geertvandenbossche.org/post/why-are-the-current-covid-19-mass-vaccinations-to-be-considered-a-public-health-experiment

Waldburger, C. (2021, August 21). *Bombshell UK data destroys entire premise for vaccine push. The media can read just as well as me (maybe), but somehow it is left to me to report this.* https://chriswaldburger.substack.com/p/bombshell-uk-data-destroys-entire

AUTHOR BIOGRAPHY

Bert Olivier is an Honorary Professor of Philosophy at the University of the Free State, South Africa. He has published academic articles and books across a wide variety of disciplines, including philosophy, art theory, architecture, literature, psychoanalytic theory, cinema, communication studies, and social theory. Bert received the South African Stals Prize for Philosophy in 2004; and a Distinguished Professorship from Nelson Mandela Metropolitan University in 2012.